

STATE OF MISSOURI DEPARTMENT OF NATURAL RESOURCES AIR POLLUTION CONTROL PROGRAM 1101 RIVERSIDE DRIVE, P.O. BOX 176 JEFFERSON CITY, MISSOURI 65102-0176

EMISSIONS INVENTORY QUESTIONNAIRE (EIQ) FORM 2.2 INCINERATOR WORKSHEET

FACILITY NAME				FIPS COUNTY NO.	F	PLANT NO.	YEAR OF DATA
[1] EQUIPMENT INFORMATION							
POINT NO. SOURCE CLASSIFI		SIFICATION	CODE (SCC)	SCC UNITS			SEG. NO.
MAXIMUM HOURLY DESIGN RATE		UNITS/HR		MAKE/MODEL SERIAL		L NUMBER	
INCINERATOR USE (CHECK ON	E)						
☐ GOVERNMENT ☐ COMMERCIA	AL IN	ISTITUTIO	NAL 🗆 INDU	JSTRIAL			
☐ OTHER, PLEASE SPECIFY:							
EQUIPMENT TYPE (CHECK APPROPRIATE BOXES)							
☐ PATHOLOGICAL ☐ SEWAGE SLUDGE ☐ MULTIPLE CHAMBERS ☐ CONTROLLED AIR ☐ OTHER, PLEASE SPECIFY:							
NUMBER OF CHAMBERS NOT INCLUDING STACK				SECONDARY CHAMBER TEMPERATURE (DEG F)			
[2] WASTE INFORMATION AND	THROUGHP	UTS					
PROCESS WASTE			HEAT C	ONTENT (BTU/UNITS	S)	ANNUAL THROUGHPUT	UNITS
TOTAL ANNUAL THROUGHPUT =						-	LBS/YR
TOTAL ANNUAL THROUGHPUT (TONS/YR) = {TOTAL ANNUAL THROUGHPUT (LBS/YR)} / 2000							TONS/YR
Enter the	TOTAL ANN	UAL THE	ROUGHPUT (T	ONS/YR) into Section	2. Bloc	ck 1 on Form 2.0.	